



Notice of Service Interruption/Area Closure
Western University
Facilities Management
Client Services 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail
 Print Form

Date of Interruption/Closure: Time(s):

Building(s) Affected: #1 #2
 #3 #4

Areas/Rooms Affected Alternate Route/Service:

Service to be interrupted: #1 #2
 #3 #4

Description/Reason for Project:

Requester: Date of Request:

Supervising Tradesperson: Unit:

Trade Manager: Unit: Date:

Contractor: Phone #

Coordinator/Project Manager: Phone # Date:

Reviewed by Trade Manager(s)/Shop(s) Affected:

Name: <input type="text" value="Electrical Shop"/>	Date: <input type="text"/>	Name: <input type="text" value="Fire Safety"/>	Date: <input type="text"/>
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Signature/Stamp: <input type="text" value="REVIEWED"/> <small>By Mark Widmeyer (mwidmey@uwo.ca) at 3:11 pm, Nov 25, 2016</small>	Signature/Stamp: <input type="text" value="REVIEWED"/> <small>By Frank (ffaroni@uwo.ca) at 4:48 pm, Nov 25, 2016</small>
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Name: <input type="text"/>	Date: <input type="text"/>	Principal Occupants:
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Signature/Stamp: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>
Name: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>
Name: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>

Approval to Proceed: Date:

Signature/Stamp:
By Andrew Merucci (amerucci@uwo.ca) at 9:22 am, Nov 28, 2016

Notes: